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RULE				

APPLICANTS

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** CONTINUING DATA *Noe/DP*** FOREIGN APPLICATIONS *Noe/DP***IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** SMALL ENTITY ****

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Foreign Priority claimed	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY	SHEETS	TOTAL CLAIMS	INDEPENDENT CLAIMS
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance <i>DP</i>	MD	DRAWING 1	1	1
Verified and Acknowledged	Examiner's Signature <i>DP</i> Initials				

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TITLE

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